R-16019 (2/04) CR 1

Application for Louisiana Revenue Account Number

Date of application

Louisiana Department of Revenue P.O. Box 201 Baton Rouge, LA 70821-0201 (225) 219-7318

_	office	use	only.

1500

1.	A. Sales/ Use General Busine Statewide Hotel			C.	☐ Witl☐ Veh☐ Sev	hholding icle Renta	al Exc	ise	F.	☐ Oth	er
	Jefferson Parish	n Hotel/N			Oil and	d Gas Cla		ation			
	Orleans ParishOrleans Parish					oayer Only ducer Only					
	☐ N.O. Airport Foo				☐ Prod	ducer/Taxp	ayer				
2.	Reason for applying		Started new busine			☐ Other					
			Purchased ongoing								
3.	Indicate the account number you use for each tax filed with the Louisiana Department of Revenue.										
	LA Corp. Tax Number	orp. Tax Number None LA Sales Tax Number None LA Excise Taxes Number None LA Excise Taxes Number None									ne u
	LA Withholding Tax Number	None 🖵	LA Severance	e Tax Nun	nber No	ne 🖵	LA	Natural I	Resource N	umber No	one 🗖
4.	A. Legal name(s)									١	
	B. Trade name of busin	ess							() lephone	
5.	A. Business location ad	dress (No									
	B. City and state								C	. ZIP	
6.	A. Address for receiving	tax form	s and corresponden	ICE (If same	e location, wri	te "same".)					
	В		C		D.	()			E. Ad	ditional ı	mailing) attached
	City an Type of organization: A.	d state		ZIP		Tele	phone		au	uress(es) allacheu
7.	Type of organization.A. L	⊒ inalviaua	ш в. — Partnersnip	U. 🗀	Corporatio	on D. 🖵 C	Jovern	mentai	E. U Non	profit i	U Other
8.	U.S. NAICS Code (required)			Federal I	Employe er	r				N	one \square
10	If sole owner (individual):	Name						SSI	u III		
									ephone ()	
							_	101	<u> </u>		
11.	If corporation or partnership: name,	Name			Title	e		SS	N		
	title, Social Security Number, home	Address						Tele	ephone ()	
	address, and				Title	9		SS	N		
	telephone number of officers or partners	Address						Tele	ephone ()	
12.	A. Louisiana Charter Nu	ımber (if	known)		B.	. State of in	ncorpo	ration (if not Loui	siana) _	
13.	Permits -Sellers of liquor,										
	A permit from the Louisian games. Indicate permit n				be obtain	nea by selle	rs of ic	ottery tic	kets or op	erators (ot video poker
	A. Lottery Permit Numb		-		B.	Expiration	Month	/Year			
	Alcohol Permit Number Expiration Month/Year										
	VPG Permit Number					Expiration					
<u>14</u> .	A. Corporation Income/Fr	anchise: I	Date charter filed wit	h Louisia	ana Secre	etary of Stat		Day Yr.	Domestic B.	Foreign	Fiscal Month C.
	Sales or Use Tax: Date b										
16.	Withholding Tax: (See instruction	ons.) Select	filing frequency. \square qu	arterly 🗆	monthly	semi-month	ly				
<u>17.</u>	17. Severance Tax: Select filing frequency. □ quarterly □ monthly □ 45-day										
<u>18.</u>	18. Description of business:										
		ı							1		
	affirm that the informa	- 0.	gnature of applicant						Title		
given on this application is true			anature of preparer						Date		